

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">M M M</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">D D D</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">Y Y Y Y Y Y Y Y</table>	

Full Name of Payee Campaign Inbox			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">20</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2020</table>		
Mailing Address 601 New Jersey Ave NW Suite 400			Amount <table border="1" style="display:inline-table; width:100%; text-align:right">2500.00</table>		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.23381		
Purpose of Expenditure Email Communication (estimate)		Category/ Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">20</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2020</table>		
Name of Federal Candidate JAMES, JOHN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table; width:150px; text-align:right">429533.21</table>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____		

Full Name of Payee Campaign Inbox			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">20</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2020</table>		
Mailing Address 601 New Jersey Ave NW Suite 400			Amount <table border="1" style="display:inline-table; width:100%; text-align:right">2500.00</table>		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.23382		
Purpose of Expenditure Email Communication (estimate)		Category/ Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">10</table> / <table border="1" style="display:inline-table; width:40px; height:20px; text-align:center">20</table> / <table border="1" style="display:inline-table; width:60px; height:20px; text-align:center">2020</table>		
Name of Federal Candidate PETERS, GARY, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table; width:150px; text-align:right">432033.21</table>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ► _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<table border="1" style="display:inline-table; width:100%; text-align:right">5000.00</table>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<table border="1" style="display:inline-table; width:100%; text-align:right"></table>
(c) TOTAL Independent Expenditures..... ►	<table border="1" style="display:inline-table; width:100%; text-align:right"></table>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

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Signature

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div>MM / DD / YYYY / / </div> <div>MM / DD / YYYY / / </div> <div>MM / DD / YYYY / / </div> </div>	

Full Name of Payee The Richard Norman Company			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2020		
Mailing Address 113 E Market Street Suite 300			Amount 29768.86		
City Leesburg	State VA	Zip Code 20176	Transaction ID : SE.23383		
Purpose of Expenditure Printing / Postage		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2020		
Name of Federal Candidate FLETCHER, ELIZABETH, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought 346134.18			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee The Richard Norman Company			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2020		
Mailing Address 113 E Market Street Suite 300			Amount 20748.74		
City Leesburg	State VA	Zip Code 20176	Transaction ID : SE.23384		
Purpose of Expenditure Printing / Postage		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2020		
Name of Federal Candidate DAVIS, WENDY, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought 252922.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	50517.60
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Full Name of Payee The Richard Norman Company		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2020	
Mailing Address 113 E Market Street Suite 300		Amount 35392.73	
City Leesburg	State VA	Zip Code 20176	Transaction ID : SE.23385
Purpose of Expenditure Printing / Postage	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2020	
Name of Federal Candidate KULKARNI, SRI PRESTON, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee The Richard Norman Company		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2020	
Mailing Address 113 E Market Street Suite 300		Amount 29997.58	
City Leesburg	State VA	Zip Code 20176	Transaction ID : SE.23386
Purpose of Expenditure Printing / Postage	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2020	
Name of Federal Candidate VALENZUELA, CANDACE, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 24 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	65390.31
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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M M M	/	D D D	/	Y Y Y Y Y Y									

Full Name of Payee The Richard Norman Company		Date of Public Distribution/Dissemination <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>21</td> <td></td> <td>2020</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	10		21		2020
M M M	/	D D D	/	Y Y Y Y Y Y									
10		21		2020									
Mailing Address 113 E Market Street Suite 300		Amount <table border="1"> <tr> <td colspan="5">20927.53</td> </tr> </table>		20927.53									
20927.53													
City Leesburg	State VA	Zip Code 20176	Transaction ID : SE.23387										
Purpose of Expenditure Printing / Postage		Category/ Type	Date of Disbursement or Obligation <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>21</td> <td></td> <td>2020</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		21		2020
M M M	/	D D D	/	Y Y Y Y Y Y									
10		21		2020									
Name of Federal Candidate ALLRED, COLIN, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 32 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX										
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶											

Full Name of Payee		Date of Public Distribution/Dissemination <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y					
M M M	/	D D D	/	Y Y Y Y Y Y									
Mailing Address		Amount <table border="1"> <tr> <td colspan="5"></td> </tr> </table>											
City	State	Zip Code	Date of Disbursement or Obligation <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y					
M M M	/	D D D	/	Y Y Y Y Y Y									
Purpose of Expenditure		Category/ Type											
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____										
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶											

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<table border="1"> <tr> <td colspan="5">20927.53</td> </tr> </table>	20927.53				
20927.53						
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<table border="1"> <tr> <td colspan="5"></td> </tr> </table>					
(c) TOTAL Independent Expenditures..... ▶	<table border="1"> <tr> <td colspan="5">141835.44</td> </tr> </table>	141835.44				
141835.44						

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